

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
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OFFICIAL USE

7009 3410 0000 2596 2677

Postage	\$	
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		

9/18/2012

Postmark
Here

Total F **Steven Orwig, President**
Orwig's Livestock Supplements, Inc.

Sent To P. O. Box 4
 Ellendale, ND 58436-0004
 DOCKET NO.: FIFRA-08-2012-0012

PS Form 3800, August 2006

See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Steven Orwig, President
 Orwig's Livestock Supplements, Inc.
 P. O. Box 4
 Ellendale, ND 58436-0004
 DOCKET NO.: FIFRA-08-2012-0012

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COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 Addressee
 B. Received by (Printed Name) C. Date of Delivery
 Amanda Thorpe 9-24-12
 D. Is delivery address different from item 1? Yes
 If YES, enter delivery address below: No

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

2. A (7) 7009 3410 0000 2596 2677

CAIFD